



10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900

NUMBER **DM** 81224

DATE OF DM: 1/28/00

Form must be completely filled out.

DEBIT MEMORANDUM

VENDOR NAME AND ADDRESS

Vendor # 112598

InaCom Purchase Order Number 6898637

TECH DATA

VENDOR INVOICE

Number 0179792

Date 12/22/99 Amount \$ 1,544.27

VENDOR CONTACT: _____

WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>A119595</u>	<u>TD218710</u>	<u>1</u>	<u>1</u>	<u>1</u>		<u>1,544.27</u>		<u>\$ 1,544.27</u>
								\$
								\$
								\$
								\$
								\$
								\$

TOTAL \$ 1,544.27

*Please provide a signed
POD w/weights, case
count + case pack.*

INACOM Co. # _____ Supplier # _____			SUBLEDGER	
BU	OBJECT	AMOUNT	TY	SUBL #

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

Prepared By: Karter

Approved By: EV

inacom10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900NUMBER **DM** 81225DATE OF DM: 1/28/00

Form must be completely filled out.

DEBIT MEMORANDUM**VENDOR NAME AND ADDRESS**Vendor # 112598InaCom Purchase Order Number 6898638**VENDOR CONTACT:****VENDOR INVOICE**Number 6179793Date 12/22/99 Amount \$ 1,544.27**WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS**

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>H119595</u>	<u>TD218710</u>	<u>1</u>	<u>1</u>	<u>1</u>		<u>1,544.27</u>		<u>\$ 1,544.27</u>
								\$
								\$
								\$
								\$
								\$
								\$

TOTAL \$ 1,544.27

Please provide a signed
POD w/ weights, case
count, & case pack.

INACOM Co. # _____ Supplier # _____		SUBLEDGER		
BU	OBJECT	AMOUNT	TY	SUBL #

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

Prepared By: TK/TCApproved By: EV



10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900

NUMBER **DM** 81226

DATE OF DM: 1/28/00

Form must be completely filled out.

DEBIT MEMORANDUM

VENDOR NAME AND ADDRESS

Vendor # 142598

InaCom Purchase Order Number 6898642

VENDOR CONTACT: _____

VENDOR INVOICE

Number 0179794

Date 12/22/99

Amount \$ 1,344.²⁷

WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>A119575</u>	<u>TD218710</u>	<u>1</u>	<u>✓ 1</u>	<u>1</u>		<u>1,344.²⁷</u>		<u>\$ 1,544.²⁷</u>
								\$
								\$
								\$
								\$
								\$
								\$

TOTAL \$ 1,544.²⁷

Please provide a signed
POD w/weights, Case
count, & case pack.

INACOM Co. # _____ Supplier # _____		SUBLEDGER		
BU	OBJECT	AMOUNT	TY	SUBL #

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

Prepared By: Mark

Approved By: EV

inacom10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900NUMBER **DM** 81229DATE OF DM: 1/19/2000

Form must be completely filled out.

DEBIT MEMORANDUM**VENDOR NAME AND ADDRESS**Vendor # 112598InaCom Purchase Order Number 16794268TECH DATA**VENDOR INVOICE**Number P647597Date 12/2/99 Amount \$ 38,140.00**VENDOR CONTACT:** _____**WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS**

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>A108745</u>	<u>TD366632</u>	<u>100</u>	<u>96</u>	<u>100</u>		<u>276. -</u>		<u>\$ 6,104.00</u>
								\$
								\$
								\$
								\$
								\$
								\$

TOTAL \$ 1,104.00

Please provide signed
POD, weights, case count
& case pack.

INACOM Co. # _____		Supplier # _____		SUBLEDGER	
BU	OBJECT	AMOUNT	TY	SUBL #	

Approval

Manager _____ Date _____

Controller _____ Date _____

Prepared By: PorterApproved By: EV

Revised 6/99



10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900

NUMBER **DM** 79485

DATE OF DM: 2-16-00

Form must be completely filled out.

DEBIT MEMORANDUM

VENDOR NAME AND ADDRESS

Tech Data

Vendor # 105387 InaCom Purchase Order Number 397493

VENDOR INVOICE

Number _____

VENDOR CONTACT: _____ Date _____ Amount \$ _____

WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rec'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>105387</u>	<u>115100824</u>	<u>1</u>	<u>1</u>	<u>—</u>	<u>1575.33</u>	<u>1575.33</u>	<u>—</u>	<u>\$ 1575.33</u>
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____

Price Variance

RA# 397493

Inv 1854075

TOTAL \$ 1575.33

INACOM Co. # <u>42</u> Supplier # _____			SUBLEDGER	
BU	OBJECT	AMOUNT	TY	SUBL #
<u>42</u>	<u>115100824</u>	<u>1575.33</u>		
_____	_____	_____		
_____	_____	_____		
_____	_____	_____		

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

Prepared By: S. DeLora

Approved By: _____



10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900

NUMBER **DM** 79484

DATE OF DM: 2/16/00

Form must be completely filled out.

DEBIT MEMORANDUM

VENDOR NAME AND ADDRESS

Team Lata

Vendor # 11372

InaCom Purchase Order Number 641157

VENDOR INVOICE

Number _____

VENDOR CONTACT: _____ Date _____ Amount \$ _____

WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>A004821</u>	<u>TL145827</u>	<u>1</u>	<u>1</u>		<u>67.14</u>	<u>59.28</u>	<u>5.28</u>	<u>\$ 5.28</u>
								\$
								\$
								\$
								\$
								\$
								\$

Price Variance

TOTAL \$ 5.28

RA# 641157

INV. 1874470

INACOM Co. # <u>42</u> Supplier # _____		SUBLEDGER		
BU	OBJECT	AMOUNT	TY	SUBL #
<u>42</u>	<u>11372</u>	<u>59.28</u>		

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

Prepared By: S. DeLora

Approved By: _____

inacom10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900NUMBER **DM** 81659DATE OF DM: 02/04/00

Form must be completely filled out.

DEBIT MEMORANDUM**VENDOR NAME AND ADDRESS**Vendor # 102598InaCom Purchase Order Number 1918320Teeth Soda**VENDOR INVOICE**Number Q280600**VENDOR CONTACT:** _____Date 12/27/99 Amount \$ 865.78**WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS**

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>2041070</u>	<u>10198752</u>	<u>1</u>	<u>0</u>	<u>1</u>		<u>841.55</u>		\$ <u>841.55</u>
								\$
								\$
							<u>prt</u>	\$ <u>24.23</u>
								\$
								\$

Please Provide Signed PO's
with weights, and amount &
net pack.

TOTAL \$ ~~841.55~~
865.78

INACOM Co. # _____		Supplier # _____		SUBLEDGER	
BU	OBJECT	AMOUNT	TY	SUBL #	

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

Prepared By: Teeth SodaApproved By: Teeth Soda

inacom10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900NUMBER **DM** 81245DATE OF DM: 1/28/00

Form must be completely filled out.

DEBIT MEMORANDUM**VENDOR NAME AND ADDRESS**Vendor # 162598InaCom Purchase Order Number 16818632TECH DATA**VENDOR INVOICE**Number 0179642Date 12/22/99Amount \$ 1,544.27**VENDOR CONTACT:****WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS**

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>A119595</u>	<u>TD218710</u>	<u>1</u>	<u>1</u>	<u>1</u>		<u>1,544.27</u>		<u>\$ 1,544.27</u>
								\$
								\$
								\$
								\$
								\$
								\$
								\$

TOTAL \$ 1,544.27

Please provide a signed
~~PO~~ w/weights, case
 count, & case pack.

INACOM Co. # _____		Supplier # _____		SUBLEDGER	
BU	OBJECT	AMOUNT	TY	SUBL #	

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

Prepared By: T. CarterApproved By: EV

inacom10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900NUMBER **DM** 81232DATE OF DM: 1/19/2000

Form must be completely filled out.

DEBIT MEMORANDUM**VENDOR NAME AND ADDRESS**Vendor # 112598InaCom Purchase Order Number 6810053*TECH DATA***VENDOR INVOICE**Number 9698114Date 12/3/99Amount \$ 9,575.37

VENDOR CONTACT: _____

WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>A102573</u>	<u>TD445610</u>	<u>21</u>	<u>9</u>	<u>21</u>		<u>11.90</u>		\$ <u>142.89</u>
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____

*Please provide signed PO
w/weights, case count
& case pack.*

TOTAL \$ 142.89

INACOM Co. # _____ Supplier # _____

SUBLEDGER

BU	OBJECT	AMOUNT	TY	SUBL #

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

Prepared By: MartelApproved By: EV



10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900

NUMBER **DM** 81231

DATE OF DM: 1/19/2002

Form must be completely filled out.

DEBIT MEMORANDUM

VENDOR NAME AND ADDRESS



Vendor # 162598

InaCom Purchase Order Number 6797361



TECH DATA



VENDOR INVOICE

Number 7660838

Date 12/3/99 Amount \$ 8,407.62

VENDOR CONTACT: _____

WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>A025963</u>	<u>TD546192</u>	<u>39</u>	<u>28</u>	<u>39</u>		<u>215.50</u>		\$ <u>2,371.38</u>
								\$
								\$
								\$
								\$
								\$
								\$

*Please provide signed POD
w/weights, case count
& case pack.*

TOTAL \$ 2,371.38

INACOM Co. # _____ Supplier # _____

SUBLEDDGER

BU	OBJECT	AMOUNT	TY	SUBL #

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

Prepared By: M. Hester

Approved By: RV

inacom10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900NUMBER **DM** 81239DATE OF DM: 1/25/10

Form must be completely filled out.

DEBIT MEMORANDUM**VENDOR NAME AND ADDRESS**Vendor # 162595InaCom Purchase Order Number 6898651TECH DATA**VENDOR INVOICE**Number 0179791**VENDOR CONTACT:** _____Date 12/22/99 Amount \$ 1,544.27**WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS**

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>7119595</u>	<u>TD218710</u>	<u>1</u>	<u>4</u>	<u>1</u>		<u>1,544.27</u>		<u>\$ 1,544.27</u>
								\$
								\$
								\$
								\$
								\$
								\$
								\$

Please provide a signed
POD w/weight, case
count, & case pack.

TOTAL \$ 1,544.27

INACOM Co. # _____ Supplier # _____		SUBLEDGER		
BU	OBJECT	AMOUNT	TY	SUBL #

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

Prepared By: MarkApproved By: EK



10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900

NUMBER **DM** 81240

DATE OF DM: 1/28/00

Form must be completely filled out.

DEBIT MEMORANDUM

VENDOR NAME AND ADDRESS



Vendor # 102598

InaCom Purchase Order Number 6898649

TECH DATA

VENDOR INVOICE

Number 8179790

Date 12/22/99 Amount \$ 1,544.27

VENDOR CONTACT: _____

WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>AH9595</u>	<u>TD218710</u>	<u>1</u>	<u>✓</u>	<u>1</u>		<u>1,544.27</u>		<u>\$ 1,544.27</u>
								\$
								\$
								\$
								\$
								\$
								\$
								\$

Please provide a signed
POD w/weights, case count
+ case pack.

TOTAL \$ 1,544.27

INACOM Co. # _____		Supplier # _____		SUBLEDGER	
BU	OBJECT	AMOUNT	TY	SUBL #	

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

42.12.150

Prepared By: Maier

Approved By: EV



10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900

NUMBER **DM** 81218

DATE OF DM: 1/28/00

Form must be completely filled out.

DEBIT MEMORANDUM

VENDOR NAME AND ADDRESS



Vendor # 112595

InaCom Purchase Order Number 6898646

VENDOR INVOICE

Number 0179787

Date 12/22/99 Amount \$ 1,544.27

VENDOR CONTACT:

WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>A119575</u>	<u>TD218710</u>	<u>1</u>	<u>1</u>	<u>1</u>		<u>1,544.27</u>		<u>\$ 1,544.27</u>
								\$
								\$
								\$
								\$
								\$
								\$

TOTAL \$ 1,544.27

Please provide a signed
POD w/ weights, case
count + case pack.

INACOM Co. # _____ Supplier # _____

SUBLEDDGER

BU	OBJECT	AMOUNT	TY	SUBL #

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

42.12.150

Prepared By: TK

Approved By: EV

inacom10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900NUMBER **DM** 81217DATE OF DM: 1/19/2000

Form must be completely filled out.

DEBIT MEMORANDUM**VENDOR NAME AND ADDRESS**Vendor # 112598InaCom Purchase Order Number 6283276TECH DATA**VENDOR INVOICE**Number 1736612**VENDOR CONTACT:** _____Date 8/23/99 Amount \$ 267.68**WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS**

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>AD08637</u>	<u>TD366331</u>	<u>2</u>	<u>0</u>	<u>2</u>		<u>21.19</u>		\$ <u>42.38</u>
<u>AT00168</u>	<u>TD366612</u>	<u>2</u>	<u>0</u>	<u>2</u>		<u>82.65</u>		\$ <u>165.30</u>
								\$
								\$
								\$
								\$
								\$

Please provide signed PO **TOTAL \$** 267.68
w/weights, case count
& case pack.

INACOM Co. # _____		Supplier # _____		SUBLEDGER	
BU	OBJECT	AMOUNT	TY	SUBL #	

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

Prepared By: MaisterApproved By: EV

inacom10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900NUMBER **DM** 81216DATE OF DM: 1/19/2000

Form must be completely filled out.

DEBIT MEMORANDUM**VENDOR NAME AND ADDRESS**Vendor # 442598InaCom Purchase Order Number 6282750**VENDOR INVOICE**Number M 309241Date 8/23/99 Amount \$ 11,035.33**VENDOR CONTACT:** _____**WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS**

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>7326658</u>	<u>TD469500</u>	<u>6</u>	<u>4</u>	<u>6</u>		<u>1,083.82</u>		<u>\$ 2,167.64</u>
<u>AD46155</u>	<u>TD469576</u>	<u>1</u>	<u>1</u>	<u>1</u>		<u>178.19</u>		<u>\$ 178.19</u>
								\$
								\$
								\$
								\$
								\$

TOTAL \$ 2,345.83

INACOM Co. # _____ Supplier # _____

SUBLEDGER

BU	OBJECT	AMOUNT	TY	SUBL #

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

Prepared By: T. CarterApproved By: EV



10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900

NUMBER **DM** 81214

DATE OF DM: 1/19/2000

Form must be completely filled out.

DEBIT MEMORANDUM

VENDOR NAME AND ADDRESS



Vendor # 162596

InaCom Purchase Order Number 2916300

VENDOR INVOICE

Number 2916300

Date 8/3/99

Amount \$ 120.00

VENDOR CONTACT: _____

WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>H025848</u>	<u>D955614</u>	<u>1</u>	<u>1</u>	<u>1</u>		<u>120.00</u>		\$ <u>120.00</u>
								\$
								\$
								\$
								\$
								\$
								\$
								\$

TOTAL \$

120.00

Please provide a signed
PO receipts, case count
& case pack.

INACOM Co. # _____ Supplier # _____			SUBLEDGER	
BU	OBJECT	AMOUNT	TY	SUBL #

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

Prepared By: Therese

Approved By: EV



10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900

NUMBER **DM** 81213

DATE OF DM: 1/19/00

Form must be completely filled out.

DEBIT MEMORANDUM

VENDOR NAME AND ADDRESS



Vendor # 162595

InaCom Purchase Order Number 6231744

VENDOR INVOICE

Number 11016898

Date 8/9/99 Amount \$ 273.87

VENDOR CONTACT: _____

WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>A110108</u>	<u>TD366612</u>	<u>1</u>	<u>✓</u>	<u>1</u>		<u>82.65</u>		\$ <u>82.65</u>
<u>A141511</u>	<u>TD366645</u>	<u>1</u>	<u>✓</u>	<u>1</u>		<u>159.23</u>		\$ <u>159.23</u>
<u>2102413</u>	<u>TD452707</u>	<u>1</u>	<u>✓</u>	<u>1</u>		<u>20.57</u>		\$ <u>20.57</u>
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____

TOTAL \$ 273.87

INACOM Co. # _____ Supplier # _____

BU	OBJECT	AMOUNT	TY	SUBL #

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

Prepared By: T. Smith

Approved By: EL



10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900

NUMBER **DM** 81212

DATE OF DM: 4/19/00

Form must be completely filled out.

DEBIT MEMORANDUM

VENDOR NAME AND ADDRESS



Vendor # 102595

InaCom Purchase Order Number 4977938

VENDOR INVOICE

Number 01054426

VENDOR CONTACT: _____ Date 8/10/99 Amount \$ 1,127.31

WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>102595</u>	<u>70421037</u>	<u>1</u>	<u>✓</u>	<u>1</u>		<u>1,081.41</u>		<u>\$ 1,081.41</u>
								\$
								\$
								\$
								\$
								\$
								\$
								\$
								\$
								\$

TOTAL \$ 1,127.31

INACOM Co. # _____		Supplier # _____		SUBLEDGER	
BU	OBJECT	AMOUNT	TY	SUBL #	

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

Prepared By: Thurter

Approved By: EV



10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900

NUMBER **DM** 81666

DATE OF DM: 2/4/00

Form must be completely filled out.

DEBIT MEMORANDUM

VENDOR NAME AND ADDRESS

Vendor # 42598 InaCom Purchase Order Number 10698645
FECH DATA

VENDOR INVOICE

Number 126653

VENDOR CONTACT: _____ Date 11/14/99 Amount \$ 1357.26

WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rec'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>A11692</u>	<u>TD46116</u>	<u>2</u>	<u>0</u>	<u>2</u>		<u>382.13</u>		\$ <u>764.26</u>
								\$
								\$
								\$
								\$
								\$
								\$

*Please provide a signed
PO w/weights, case count
+ case pack.*

TOTAL \$ 764.26

INACOM Co. # _____	Supplier # _____	SUBLEDGER		
BU	OBJECT	AMOUNT	TY	SUBL #

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

Prepared By: THU

Approved By: EV

inacom10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900NUMBER **DM 79475**DATE OF DM: 2-7-00

Form must be completely filled out.

DEBIT MEMORANDUM**VENDOR NAME AND ADDRESS**

Tech Link

Vendor # 102318InaCom Purchase Order Number 551132**VENDOR INVOICE**

Number _____

VENDOR CONTACT: _____ Date _____ Amount \$ _____

WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rev'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
60187E	801000	1	1		71135	71112	23	\$ 52.18
								\$
								\$
								\$
								\$
								\$
								\$

KING VENDOR
LA SURE
INV 128837TOTAL \$ 58.18

INACOM Co. # <u>42</u> Supplier # _____		SUBLEDGER		
BU	OBJECT	AMOUNT	TY	SUBL #
42	11112	(58.18)		

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

ENTERED FEB 10 2000

Prepared By: DeLoaApproved By: Watkins



10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900

NUMBER **DM 79359**

DATE OF DM: 1/12/00

Form must be completely filled out.

DEBIT MEMORANDUM

VENDOR NAME AND ADDRESS

Tech Data

Vendor # 105572

InaCom Purchase Order Number 383401

VENDOR INVOICE

Number _____

VENDOR CONTACT: _____ Date _____ Amount \$ _____

WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
	<u>See attached</u>							\$
								\$
								\$
								\$
								\$
								\$

TOTAL \$ 11335.01

INACOM Co. # <u>113</u>		Supplier # _____		SUBLEDGER	
BU	OBJECT	AMOUNT	TY	SUBL #	
<u>913</u>	<u>11.14</u>	<u>11335.01</u>			

Approval

Manager _____ Date _____

Controller _____ Date _____

Prepared By: [Signature]

Approved By: [Signature]

Revised 6/99



10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900

NUMBER **DM** 81230

DATE OF DM: 1/19/2000

Form must be completely filled out.

DEBIT MEMORANDUM

VENDOR NAME AND ADDRESS



Vendor # 142598

InaCom Purchase Order Number 6794260



VENDOR INVOICE

Number 2646074

Date 12/2/99

Amount \$ 113,160.-

VENDOR CONTACT: _____

WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rev'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>ADJ8745</u>	<u>TD366632</u>	<u>300</u>	<u>299</u>	<u>300</u>		<u>276.-</u>		\$ <u>276.-</u>
								\$
								\$
								\$
								\$
								\$
								\$

Please provide signed PO TOTAL \$ 276.-
reprints, case count
& case pack.

INACOM Co. # _____		Supplier # _____		SUBLEDGER	
BU	OBJECT	AMOUNT	TY	SUBL #	

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

Prepared By: Ma. T.

Approved By: EV



10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900

NUMBER **DM** 79474

DATE OF DM: 2-8-00

Form must be completely filled out.

DEBIT MEMORANDUM

VENDOR NAME AND ADDRESS

Tech Data

Vendor # 102572

InaCom Purchase Order Number 488015-A

VENDOR INVOICE

Number _____

VENDOR CONTACT: _____ Date _____ Amount \$ _____

WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>A01721</u>	<u>11801012</u>	<u>1</u>	<u>1</u>	<u>1</u>	<u>10.12</u>	<u>25.00</u>	<u>5.12</u>	<u>\$ 502.46</u>
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	_____	_____	\$ _____

Pink Voucher
RA 488015-A
Inv 1714471

TOTAL \$ 502.46

INACOM Co. # <u>42</u>		Supplier # _____		SUBLEDGER	
BU	OBJECT	AMOUNT	TY	SUBL #	
<u>42</u>	<u>11272</u>	<u>502.46</u>			
_____	_____	_____			
_____	_____	_____			
_____	_____	_____			

Approval

Manager _____ Date _____

Controller _____ Date _____

Revised 6/99

ENTERED FEB 10 2000

Prepared By: S. DeLoa

Approved By: [Signature]



10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900

NUMBER **DM** 82539

DATE OF DM: 2/21/00

Form must be completely filled out.

DEBIT MEMORANDUM

VENDOR NAME AND ADDRESS

Vendor # 112598

InaCom Purchase Order Number 7012179

VENDOR CONTACT:

VENDOR INVOICE

Number Q796424

Date 1/18/00 Amount \$ 173,704.50

WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoked	P.O. Price	Invoice Price	Difference	Debit Amount
<u>A055519</u>	<u>473263</u>	<u>50</u>	<u>48</u>	<u>50</u>		<u>3,474.09</u>		<u>\$ 6,948.18</u>
								\$
								\$
								\$
								\$
								\$
								\$

NOTE: 2 pieces refused
because they were damaged. TOTAL \$ 6,948.18

- ☒ Product not received – Please provide signed POD, with/weights, case count and case pack.
☐ Price Discrepancy
☐ Concealed Shortage

INACOM Co. # _____ Supplier # _____				SUBLEDGER	
BU	OBJECT	AMOUNT	TY	SUBL #	

Prepared By: Karter

Approved By: EW

Revised 6/99

inacom10810 FARNAM DRIVE
OMAHA, NE 68154
402-392-3900NUMBER **DM** 82591DATE OF DM: 2 22 00

Form must be completely filled out.

DEBIT MEMORANDUM**VENDOR NAME AND ADDRESS**

[

Vendor # 102598 InaCom Purchase Order Number 6052319Tech Data

L

]

VENDOR INVOICENumber 1174760VENDOR CONTACT: _____ Date 6 29 99 Amount \$ 11675 64**WE HAVE DEBITED YOUR ACCOUNT AS FOLLOWS**

InaCom Part Number	Vendor Part Number	Qty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
<u>A014031</u>	<u>85H8840</u>			<u>1</u>		<u>30977</u>		\$ <u>119931</u>
								\$
								\$
								\$
								\$
								\$
								\$

TOTAL \$ 119931☒ Product not received – Please provide signed POD, with/weights, case count and case pack.☐ Price Discrepancy☐ Concealed Shortage

INACOM Co. # _____		Supplier # _____		SUBLEDGER	
BU	OBJECT	AMOUNT	TY	SUBL #	
<u>42</u>	<u>12130</u>				

Prepared By: [Signature]Approved By: [Signature]

Revised 6/99